THE LANCET.

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THE HUNTERIAN ORATION.

THE Hunterian Oration, as it is called, was delivered on Monday last by Mr. NORRIS, before the assembled College of Surgeons, and some non-professional visitors, among whom we recognised several barristers and persons of distinction. Among those whom experience has not taught to come prepared for the intellectual banquet which awaits them on this occasion considerable expectation is usually excited by this annual ceremony. The objects of this Oration are not only to commemorate the genius, and to record the researches and discoveries of the greatest man that ever adorned our profession; but also to notice the merits of those who may have successfully trodden in the same paths; to attract therefore, in effect, the public to the actual state of surgery; to show how much benefit the science has derived from the improvements which were introduced into it by JOHN HUNTER, and with what zeal and ability those improvements have been adopted and extended by his gifted successors. With what success all these objects were developed and enforced in the Oration of Mr. NORRIS those members of the profession who were present in the theatre of the College of Surgeons, on Monday last, have probably already decided for themselves. To those who were unable, or who did not choose to avail themselves of the privilege of entering at the *back-door* of that Institution, and to some thousand readers who do not possess that enviable privilege, a few observations on the *manner* in which the Oration was delivered, and on the *matter* which it contains, may not be wholly unacceptable. In the first place, we object *in limine* to the thing which was delivered on Monday last being styled an oration; still more strongly do we protest against the claim of Mr. NORRIS to the title of an Orator. We do not rest the first of these objections on the merits of Mr. Norris's composition, but on the manner in which it was delivered; for, though we can scarcely conceive a poorer achievement in point of oratory than that with which Mr. Norris regaled his auditory on this occasion, still, had it been *spoken*, it would at least have been nominally what it pretends to be, since it has been decided by an authority which may be considered conclusive on this point, that *omnis locutio oratio est, quanquam unius oratoris locutio oratio propriè signatur*. Now, what was the manner in which the Hunterian Oration was delivered

on Monday last? Mr. Norris, arrayed in his official gown, advanced to the centre of a table; and, having saluted the vice-president and the assembled members, deliberately drew from his pocket a written paper, which he read in so low a tone of voice, and in so indistinct and inarticulate a manner, that he must have been quite inaudible in many parts of the theatre. In the course of his Oration the Orator called for a light, by the aid of which he continued to read until the force of his eloquence was expended, or, in other words, until he arrived at the end of his paper. The call for the candle we believe to be unique in the history of oratory. We remember having, on one occasion, seen a member of a very distinguished assembly stop short in the midst of one of the most impassioned passages in his speech, and candour obliges us to add, that, after several unsuccessful attempts to conclude a powerful appeal to the feelings, we saw the honourable member *cautiously pull the remainder of the sentiment from his breeches pocket.* This was a crisis of some delicacy; still, however, an orator's reputation might not be entirely compromised by such a transaction; a careless observer might not have detected it, and a charitable eye might have been studiously averted from it; but Mr. Norris's call for the candle was so utterly subversive of his character of Orator, that, although we had all the disposition in the world to imagine that he was pronouncing an Oration, we were really at a loss to see, after the call for the candle, how the illusion could possibly be sustained. When the lights were called for, we were tempted to exclaim with Polonius, "Give o'er the play."

The very indistinct and slovenly articulation of Mr. Norris was another unfortunate circumstance in the delivery of this Oration, for it so happened that one of the first positions which Mr. Norris laid down, was, that a distinct articulation was indispensably necessary in a surgeon, and he then went so far as to recommend the parents of young men, who were defective in that, or any other physical quality, to abandon all thoughts of bringing them up to the profession of surgery. We do not attach quite so much importance to a clear articulation as Mr. Norris appears to do, though his opinion as to this, and some other accomplishments, is the more entitled to respect, as it seems to be perfectly disinterested; and it is no doubt a fortunate circumstance, that those who decided for Mr. Norris, in the choice of a profession, were not influenced by those fastidious principles which he recommended to the adoption of parents and guardians in his Hunterian Oration.

So much for the manner in which this Oration was delivered; of the *matter*, which it contains, our readers will be enabled to judge by the annexed report, which we give at great length, not on account of its own merits, but because the annual delivery of this oration is an event of too much importance in the medical world not to be faithfully recorded in this journal, and because we deem it but just to Mr. Norris that the public should have an opportunity of estimating the

fairness of the observations which we feel it our duty to make on his performance. Our readers will perceive that one half of this oration, as it is called, which is addressed, be it remembered, to an auditory consisting exclusively, with the exception of a few visitors, of MEMBERS of the College of Surgeons, consists of a series of observations on the course of study which the young student should pursue, with a view to his examination and ultimate admission as a member of the College. This is so singular a mode of commemorating the researches and discoveries of JOHN HUNTER, and recording the merits of those who have distinguished themselves in the same paths of science, that we cannot help suspecting one of two things; either that the orator meant this part of the oration to be taken as a refined piece of ridicule, on the degenerate state of surgery since the days of HUNTER, intimating thereby that the gravest members of the profession required a course of elementary instruction; or, what is perhaps more probable, that the orator, having been called upon to discharge this annual duty, yielded to the allurements of mental repose, and tacked together an old introductory Surgical Lecture to a few common-place remarks on the talents and scientific achievements of JOHN HUNTER. We have endeavoured to furnish an explanation of a phenomenon which cannot fail to strike every one who peruses this singular production. It remains for our readers to judge whether we have not at least suggested a probable solution. The staple commodity of the Oration may be designated in one word, and the only word which precisely characterises it, "*twaddle*;" the tirades about Servetus, liberty, bloody fanaticism, Homer, taste, Demosthenes, seats of learning, Greece, and her barbarous oppressors, &c. are "*the fringe.*" Hunterian Orators seem to have a prescriptive privilege of imitating the Dutch philosopher, who, having written a huge tract *De omnibus rebus*, could not resist the temptation of adding a small appendix *et quibusdam aliis.*

There was another phenomenon which struck every body in the Theatre on Monday last, we allude to the extraordinary change produced in Sir WILLIAM BLIZARD by the salutary application of THE LANCET. The conduct of that worthy Knight throughout the proceedings was perfectly tranquil, gentleman-like, and decorous.

We cannot omit this opportunity of noticing the marked disrespect which is shown to the great body of the MEMBERS of the College, in admitting them only at the back-door in Portugal-street, while a few members, not in any way distinguished from their colleagues by their rank or talents, and among them even the "Hole and Corner" surgeons, are admitted through the official portals in Lincoln's Inn Fields. After the salutary change to which we have just alluded, we do not despair of seeing our friend Sir WILLIAM BLIZARD strenuously exerting himself to correct this palpable abuse and insult.

Mr. Vice-President & Gentlemen,

This annual commemoration of the birth of John Hunter is dedicated to the grateful notice of that very distinguished and extraordinary man. It was suggested, by the liberal minds of Sir Everard Home and the late lamented Dr. Matthew Bailey, to commemorate the achievements of that great man in anatomy and physiology, and at the same time to record the merits of such deceased members of our profession as may have contributed to the advancement of chirurgical science. This extensive field is strewed with flowers and fruits of the most beautiful and useful kind, where the man of contemplative mind, who properly estimates genius and inventive power, may expatiate with satisfaction, and retire from the contemplation of mental excellence delighted, refreshed, and improved. Those studies which are directed to the attainment of natural knowledge, the alleviation of human suffering, and the preservation of life, as they possess the deepest interest, so they cannot fail to engage, above all others, the attention of mankind. Hence the medical profession has always been highly estimated among polished nations, and the physician or surgeon who has the happiness to render himself distinguished by useful discoveries, or skilful practice, is justly considered the pride and blessing of his country. In every class of society men of extraordinary mental powers have from time to time appeared, who have advanced the boundaries of human knowledge; and even the humble, unlettered mechanic has often contributed his full share to the honour, wealth, and power of this country, as many of our great establishments which display the almost miraculous power of machinery, amply testify. The merchant contributes to the improvement and civilization of mankind, by diffusing the produce of the national industry over the whole world; the philosopher, who is engaged in the study of the mechanism of the globe, and the materials of which it is composed, is daily making some discovery by which the comforts of man are increased; and there are few pursuits in which, at the present day, living examples may not be cited, in this country, who have eclipsed all that has been achieved by their predecessors—all that is recorded in history. These advantages may be ascribed, in a great measure, to the nature of our government, which affords such entire protection to the person and property of the subject, and gives such unbounded encouragement to every species of intellectual exertion. The securities of good government hold out at the same time the greatest probability of obtaining rank, independence, and honour to all who are qualified, by their talents and attainments, to distinguish themselves, in any pursuit or profession to which they may devote them.

The distinguished individual who addressed you last year from this chair, in examining the merits of the extraordinary person whose birth we are this day met to celebrate, took occasion to define what he understood by the word 'genius,' and he proceeded to state that the strongest intellectual powers were inadequate to

the attainment of excellence, in any pursuit or profession, and especially of the medical profession, if unassisted by patient and laborious study. It is my present object to direct your attention to a few things, which are essentially necessary to facilitate the attainment of excellence in the medical profession. I must confine myself, however, to a mere sketch and outline of the course of study which is necessary for this purpose, as the time allotted to me does not admit of a more lengthened detail.

There is no short way to science, and in the art of healing it is very long, for it necessarily implies profound study, deep research, and accurate observation. In that particular branch of medical science, which is termed the art of surgery, there are some primary considerations which should greatly influence the parents or guardians of a young man, who may be destined to it. It is indispensably necessary that the surgeon should have a clear eye, an acute sense of hearing, a distinct articulation, in short that he should have no bodily defect. He should have a taste for reading, and the acquirement of general knowledge, and it should be particularly ascertained whether he has a predilection for anatomical investigation, or whether he entertains a repugnance to the study of that science, without a thorough knowledge of which he can never hope to excel. If he has such a repugnance, his parents should at once abandon all thoughts of educating him for the profession of surgery; but supposing every thing to concur favourably with their views, it should be borne in mind that, as the profession of a surgeon is now happily that of a gentleman, his education should be liberal and extensive. A foundation of classical learning is indispensably necessary, and a familiar acquaintance with the languages of modern Europe, particularly those of France and Germany, will be of incalculable advantage to him, as it will enable him, in effect, to maintain an intercourse with all the civilized nations of Europe, to appreciate recent discoveries, to ascertain differences in practice and opinions, and to keep pace with the progress of medical science in all parts of the world. There is, in fact, no art or science, a knowledge of which may not be convertible to good in surgery. Drawing, perspective, and mechanics are highly deserving of encouragement; they will materially assist him in his professional pursuits, while they will afford him an agreeable relaxation in his intervals of leisure. A knowledge of botany may be usefully and pleasantly acquired, and a familiar acquaintance with the habits of birds, insects, and the lower animals, will be found a very useful preparation for the prosecution of further inquiries. The mind of the student will, in this way, be beneficially directed to the study of natural and experimental philosophy; his reasoning powers will become expanded, and he will see with delight those experiments performed, which demonstrate the truth of those phenomena in the animal economy, a knowledge of the theory of which he has already acquired. When his attention is drawn to the very important science

of chemistry, he will acquire a knowledge of the nature of those substances by which we are surrounded, and of their infinitely diversified combinations. The universality of the application of chemical knowledge can hardly be too strongly insisted upon. In agriculture, it is highly useful; in all the arts, it is essential; and even to the mere gentleman, who directs a portion of his time to scientific inquiry, it is a never-failing source of pleasure and improvement. These pursuits will enlighten and invigorate the mind of the young student, and lead him to contemplate, with becoming awe and reverence, the GREAT FIRST CAUSE. He will now be desirous of becoming acquainted with the structure of animals, and the daily habit of dissecting them will enable him to understand the various apparatus by which they are fitted to perform the different functions of the animal economy. He will thus be prepared to study and comprehend the structure of the human subject; and he should prosecute this study, which is essentially necessary to his future professional advancement, in some of those justly celebrated schools with which this metropolis abounds. Though a correct knowledge of every part of the human body is indispensably necessary, he will do well to confine his attention, in the first instance, to the study of the bones of the skeleton; he will observe how admirably these are fitted to the purposes for which Nature designed them, in what manner they are connected with the ligaments, and how they are acted upon by the muscles. He will find that a knowledge of mechanics will greatly assist him in comprehending this part of the science of anatomy. An injection of the arteries, veins, and absorbents, will be found particularly useful in facilitating his inquiries; and particular attention should be given to the origin and distribution of the nerves, through whose influence such wonderful effects are produced in the human system.

When he has acquired a thorough knowledge of the structure of the various parts of the human body, physiology should form the next subject of his attention. And here he will find, that though the doctrine of sympathy and nervous communication will satisfactorily account for many phenomena, still abundant obscurities remain, which afford an ample field for the exercise of the talents and sagacity of future inquirers. On an occasion similar to the present, Mr. ABERNETHY observed, that, as it would be folly in a mechanic to attempt to correct any complicated piece of machinery without being thoroughly acquainted with the structure of all its parts, so the conduct of the medical practitioner would be equally absurd, who, though he might be acquainted with botany, pharmacy, chemistry, and natural philosophy, should attempt to restore the human body to health, without knowing the difference between its structure in a state of health, and of disease.

Having acquired a competent knowledge of these subjects, the student may now advantageously devote himself to the study of Pathology, and, by attending some of our admirable receptacles for those who are afflicted with disease, he will have an oppor-

tunity of acquiring the most valuable knowledge. He should omit no favourable opportunity of witnessing operations, and of examining the body after death. Observations on the structure of parts in the dead body will often suggest means by which similar diseases may hereafter be more successfully treated, or they furnish demonstration of the incurable nature of the disease. In every point of view they are of the utmost importance, as they often afford consolation to the surviving relatives and friends, and always contribute to pathological knowledge.

After this course of study and observation, during which he should not neglect to make himself acquainted with the ancient luminaries of our art, HIPPOCRATES, GALEN, and CELSUS, (his proficiency in these acquirements being ascertained by an impartial examination,) he will be entitled to become a member of our college. A man thus educated will be well qualified to exercise his profession either in civil life or in our army or navy, and may look forward, with confidence, to the esteem and regard of all good and wise men.

As members of our profession are often made the depositories of secrets, he should observe the strictest propriety in his moral conduct. In consultation with his professional brethren, he should be free, open, and communicative. No situation requires greater delicacy, even to etiquette, than that of the surgical practitioner; he should spurn all trick and selfishness, and carefully avoid every thing that borders upon illiberality. As cases of a mixed and complicated nature often occur, communication with the distinguished members of the other branch of the profession, and with men who are skilled in other branches of science, will often lead to the most valuable practical results in the treatment of disease. It is by such an enlarged and liberal system of study that the surgeon can alone expect to acquire a perfect knowledge of his profession; it is by such a system of study that he will be enabled

> "To look through nature up to nature's God;"

and, while he is inspired with awe, reverence, and gratitude to the Supreme Being, he will be equally animated with benevolence and love to mankind. As men, however, are endowed with different capacities, and all cannot arrive at the same degree of eminence, every thing like overbearing hauteur should be avoided in our conduct towards our less distinguished professional brethren.

It is a great honour to the members of the medical profession, and is perhaps to be ascribed to the liberal nature of their pursuits, that in that epidemic phrenzy which afflicted and desolated Europe, when man persecuted man on account of his opinions, no well-educated physician or surgeon was ever an actor. This liberal spirit, on the part of the medical profession, did not, however, always shield them against the fury of bloody fanaticism, as the melancholy fate of the amiable and pious SERVETUS too clearly testifies. Even at the present moment it is to be regretted, that the same intolerant spirit, which doomed Servetus

to a cruel death, is not entirely extinguished in every part of Europe. I trust I shall be excused for making this observation, which seemed to be naturally suggested by the consideration of the effect which liberal studies have in enlarging the mind, and raising it above the prejudices of the age.

Having pointed out the long and laborious course of study which is necessary to constitute a well-educated surgeon, it is particularly gratifying to me to see, in this theatre, several eminent individuals, who are justly celebrated for their attainments in anatomical and physiological science, and the fruits of whose researches are diffused over the whole civilized world. Some of these have grown old in years, honours, and reputation, and now seek repose from the more arduous labours of the profession, though they still afford their invaluable assistance in promoting the objects of medical science.

To their useful and honourable services surgery is indebted for the elevated rank which it has attained, under the fostering protection of his late and present Majesty. Among the many gracious acts of his present Majesty, we are indebted to him for many valuable specimens in natural history, which he has presented to us, for the advancement of scientific investigation.

The very extraordinary genius, and inventive powers of the great man whose birth we are this day celebrating, have often been commemorated with grateful enthusiasm from this chair; but I should find it impossible to enumerate all his discoveries, and all the researches in physiology, pathology, and natural history, in which he was without intermission engaged. The ultimate object of this kind-hearted, generous, and amiable man, was to benefit mankind by the diffusion of anatomical, physiological, and pathological knowledge. The life of man was inadequate to the completion of the comprehensive scheme which he had formed, but what he actually accomplished will never cease to be the theme of grateful admiration in all succeeding ages. When HUNTER first applied himself to anatomical pursuits, he had probably nothing further in view than to illustrate the natural structure of the human body. Daily occupied in this pursuit, the correctness of his dissections was only equalled by the dexterity with which he performed them. His fondness for anatomical science soon became ardour, and ardour enthusiasm, and in the course of the investigations in which he was engaged, he often met with deviations from the natural and healthy structure, either in the form of *lusus naturæ*, or such as were produced by accident or disease. These deviations did not escape his observation; he constantly noted down all that he saw, and accompanied his observations with accurate and beautiful illustrative drawings. He observed the general analogy in the structure of all animals that inhabit this globe; he noticed the various processes by which nature provides them with the means of satisfying themselves, by the proper aliment—the apparatus with which they are furnished for digesting that aliment—the respiratory system, by

which they inhale that portion of the atmosphere which is essential to life, and expel that which is destructive of it—the process of perspiration, which is carried through the pores of the skin. All these important functions were ascertained by his accurate hand and inquiring mind, while at the same time he discovered and explained many subsidiary circumstances connected with them.

While he was thus closely engaged in the study of comparative anatomy, he observed every peculiarity of structure in a vast number of animals which he submitted to dissection. He made beautiful drawings of these peculiarities, which suggested to his ardent mind matter for physiological induction, the fruits of which he afterwards communicated to the public. Of the wonderful extent of his labours some idea may be formed, when I state, from good authority, that after his death, nine manuscript volumes in folio were found, on the subjects of anatomy, physiology, and pathology; besides a tenth volume in folio, on the subject of natural history. This is the more wonderful, when we consider that he was extensively engaged in the practice of an anxious and laborious profession. Every object of interest in comparative anatomy being thus preserved, his preparations every day increased, until they amounted to a most prodigious number. He had formed a very imperfect catalogue of the whole collection, which he found so numerous and multifarious, that he felt the necessity of classifying the various objects which it contained, and reducing them to a scientific arrangement. The accomplishment of this object was the source of his greatest solicitude to the end of his life; and at the time of his sudden death, the catalogue which he left behind him was still in a very imperfect state. The catalogue, as it appeared in 1793, has been since corrected and extended in the years 1800 and 1817 It is with great satisfaction that I am enabled to state, that this collection, consisting of upwards of 30,000 specimens, which it was the great object of Mr. HUNTER's life to form, is now placed under such arrangements as afford the strongest assurance that no expense, assiduity, or care, will be spared to carry into effect the plan which Mr. HUNTER laid down during his life towards the completion of his great work. It is satisfactory to know that Mr. Clift continues to be the conservator of this collection, as he has been ever since the year 1792, and that all his persevering industry and talents are devoted to the accomplishment of this great object. And here a pleasing thought occurs to the mind —that if Mr. HUNTER can see—and perhaps he does—the beautiful and perfect state in which the museum, which is the depository of his great labours, is kept, he must witness it, as far as mortals can judge, with feelings of satisfaction.

When we are considering the claims of the great men who have gone before us to the gratitude of posterity, it has been observed, that it is no inconsiderable source of pleasure to contemplate the lineaments of their countenance, and in this respect the college may be considered as particularly

fortunate in possessing the admirable portrait of Mr. HUNTER, which is now before you. I believe this picture is considered one of the happiest efforts of Sir JOSHUA REYNOLDS, and gives a faithful representation of the countenance, person, and manner of Mr. HUNTER. One quality by which Sir JOSHUA REYNOLDS was particularly distinguished was the art of painting the mind, if I may be allowed that expression, and of this particular excellence the portrait before you affords a striking example; for I think it is quite impossible for any man to observe the expression of that countenance without being convinced that the original was a man of very superior intellectual powers.

The materials of which this invaluable picture is composed are frail, and an accident of no uncommon occurrence might deprive us of it for ever. Fortunately, however, while Sir JOSHUA REYNOLDS was painting his picture, he requested that a cast might be taken of the countenance of Mr. HUNTER, that he might study it more deliberately. This cast, the excellence of which has been generally admitted, was found among the lumber in Sir Joshua Reynolds's house after his decease, and from it a bust has been taken, which, in point of execution, is no less happy than the picture by Sir Joshua Reynolds. As if destined for immortality, this marble, as imperishable as the world, will present to future generations a correct likeness of JOHN HUNTER, delineated by the hand of CHANTREY.

Many a beautiful relic has reached us from the remotest antiquity, which demonstrates the unrivalled excellence of the ancients in the arts of architecture and sculpture.

Among the nations which were most distinguished for their proficiency in those arts, was Greece—Greece, that favoured land of liberty, genius, and science—that land which was the birth-place of Hippocrates, Galen, Homer, Demosthenes, Xenophon, and a thousand others, whose names are familiar in those seats of learning, where their immortal productions have inspired a love for virtuous and honourable independence. Who has not shed a tear over the degenerate state of that country, once so renowned for all that dignifies, and all that embellishes social existence? Who has not sympathised with the noble and energetic spirit which has been again displayed by a people who have shown themselves worthy of the honoured stock from which they spring, in the generous efforts which they have made to emancipate themselves from the shackles of their barbarous and tyrannical oppressors?

To return to the subject of this Oration, the wisdom of the government, and the liberality of Parliament, have made Mr. HUNTER's collection our own, accompanied with certain conditions, the principal of which is, that of delivering an annual course of Lectures on the subjects of comparative anatomy, physiology, and pathology, which are to be illustrated, as far as possible, by the preparations in the Collection. Of these Lectures, some have been addressed to you from this chair by the most distinguished members of our profession, who have held

the important office of Professor. To allude to the merits of particular lecturers would not be consistent with propriety or delicacy, but I may be allowed to observe, that many of them, in commenting upon, and explaining the contents of the Museum, have contributed to throw much light on anatomical, physiological, and pathological science, while instruction has been conveyed in language enforced with as much energy, and adorned with as much eloquence, as was consistent with the gravity of the subject.

While I have to commemorate the valuable services of those who have efficiently performed a great public duty, we have also to deplore the loss of others who have been separated from us by death, but we have at least the consolation to reflect that,

"—— Primo avulso non deficit alter
Aureus, et simili frondescit virga metallo."

REVIEWS FROM THE WEST.

Edinburgh Medical and Surgical Journal. No. 82. *Jan.* 1, 1825.

The last Number of this Journal is distinguished by the rare excellence of the most elaborate inversion of the *multum in parvo* on record; presenting, in fact, a *minimum* of instruction in the most voluminous form. There are no less than seventy-five pages devoted to what are called, in the technical *parlance* of the journalizing art, "Original Communications," each, indeed, differing in length and topic, but all nearly harmonizing in a nullity of merit. Long and short, good and bad, as they may be, we shall go through them, selecting whatever we find useful in this vast expanse of print and paper. It strikes us, however, as a singular anomaly, that so respectable a Journal would admit into its pages so many articles utterly destitute of interest. Can that criticism, which we find bound up in the same cover with these stupid essays, be deemed very profound or impartial? Should not a portion of the critical acumen, so lavishly expended in this journal on larger works, be preserved for condemning some at least of these fifteen "original communications" to the flames, instead of preparing them for the press? A knowledge of Scotch *modesty*, only, can resolve this problem.

The *Original* department of the work opens with an article by Mr. Cummin, of Glasgow, on the diseases of bones. Mr. Cummin, it appears, from the *procm* to his paper, is not satisfied with the writings or conversations of authors upon his subject, and Mr. Crampton of Dublin, Mr. Liston and Mr. Lizars of Edinburgh, with the illustrious Scarpa, are severally pointed out as nescient of the pathology of the bones. Under this impression, he proposes to enlighten them upon this subject in the following table, which we shall insert, as it contains, in a great measure, the pith of his discourse.

"I.—*Ostitis.* Inflammation of the bone.

II.—*Hyperostitis.* Morbidly increased deposition af osseous matter, without the formation of any circumscribed tumour.

III.—*Osteo-apertema.* Suppuration within the osseous substance.

IV.—*Caries.* Ulcer of the bone.

Spec. 1. Caries Exedens. Destructive ulcer of the bone.

Spec. 2. Caries Ossificans. Ulcer of the bone, with a deposition of new osseous substance, having a morbid and imperfect organization.

V.—*Osteo-anabrosis.* Simple absorption of the bone, or erosion.

VI.—*Osteo-necrosis.* Death of the bone.

Spec. 1. Osteo-necrosis simplex. Simple loss of vitality.

Spec. 2. Osteo-necrosis regenrans. Loss of vitality, with a regenerative process.

VII.—*Exostosis.* Distinct, circumscribed tumour arising from bone, and consisting wholly or partly of osseous substance.

Spec. 1. Exostosis cellularis. Tumour inclosing osseous portions, more or less perfect.

Spec. 2. Exostosis petrosa ad laminata. Tumour formed of craggy portions of bone, or laminated excrescences, intermixed with cartilage.

Spec. 3. Exostosis eburna. Osseous tumour, having the whiteness and solidity of ivory.

VIII.—*Osteo-sarcoma.* Sarcomatous tumour, originating from the lining membranes of the longitudinal canals of bones.

IX.—*Osteo-malaria.* Softening of the bones.

Spec. 1. Ost.-mal. infantium. The proportion of albumenous substance much increased; the cortex of the bone thickened; texture reticulated.

Spec. 2. Ost-mal. adulterum. Both the albumenous and earthy materials much diminished; cortex greatly diminished.

To this tabular view of the pathology of the bones, the author, though he discusses at some length each head *seriatim*, has added little to extort remark or entice quotation; yet, in conformity with custom, we shall accompany him in his secondary labours, and see whether these comments throw any additional light upon the version already given of his text. The old term, "fragilitas ossium," seems to have savoured too much of antiquity to be worthy of a place in our author's elegant nomenclature, and accordingly we find it superseded by the more classical appellation of "osteo-malaria;" but with what reference to utility is not quite apparent. Consubstantial with the puerile ingenuity of the preceding technical metamorphose, are the subsequent observations, by which we are seriously informed, that "simple nudation," cannot be considered a disease of bone, and that "ostitis resembles inflammation in the soft parts of the body,"—two most profound discoveries! but we required neither a ghost nor a Glasgow man to tell us these strange facts. Hyper-ostitis he defines to be that state of a bone occurring after inflammation, wherein a deposition of earthy matter takes place at this stage of the disease. Inflammation, however, he deems not to be necessary to its production, as it sometimes supervenes, and is the means by which nature effects the cure of rickets. The definition of "osteo-apertema," already given, contains all the information he seems capable of communicating; indeed from the paucity of his knowledge upon this subject, it would appear to us as if he had never attentively examined an abscess of bone, for he has not offered one observation on its pathology. Caries we find divided into two species—exedens and ossificans. One of these terms is a superfluity; the other a misapplication. Caries

required no qualifying epithet to explain its meaning, neither should it be confounded with ossification, a process entirely distinct. The addition of osteo to necrosis is rather a desperate attempt to produce novelty from the simplest combination. Some old author, it would appear, applied the term necrosis to dry gangrene in the softer parts; and, lest his example should have a fatal influence on the medical world, Mr. Cummin kindly offers a distinction which, no doubt, will be duly appreciated by the profession. Of the propriety of dividing this disease into species, our silence, we trust, will be eloquent.

Much in the same light are we inclined to consider the divisional arrangement to which exostosis has been subjected for if a generic title be applied to every form of this disease, then indeed would there be as many names as there are cases of this malady. Mr. Cooper, we hope, in the next edition of his Dictionary, will satisfy Mr. Cummin of the deficiency of his information on the subject of osteosarcoma. Until this desirable event occurs, the public must remain content with the following definition by Mr. Cummin: "This term," he says, "should be limited to a degeneration and morbid growth of the lining membranes of the longitudinal canals of the bones, accompanied in all cases by an absorption of the osseous substance of the bones. It always originates within the periosteum, which it retains to the last as an investment. Its contents vary; sometimes resembling a gland, a bloody fungus, old cheese, or brain or soap," or what you please, reader! The disease is of slow progress, hardly distinguishable at first from rheumatism or venereal pains. A tumour next forms, in which a pulsation may be distinctly felt; hectic then supervenes, with its concomitants, and destroys life." There is a case given to illustrate these remarks, for which we have no room at present. To one who has been at such pains to be unprofitably minute, and pedantically systematic, it would be ungracious, even in a hard-hearted critic, to withhold from him that indulgence which he claims at the close of his labours, for the term "osteomalaria:" let it therefore pass—probably it is the last time it shall ever be heard of; oblivion has disposed of much more valuable inventions than any which Mr. Cummin's genius shall ever produce.

The second article (case of diseased lung, with a dissection) by a Mr. Cobb, affords nothing to warrant observation. Should such a case occur to him a second time, we trust he will have the good sense not to intrude on the public a dissection necessarily destitute of all interest from frequent occurrence. The morbid anatomy of tuberculated lungs is known to every tyro of a year's standing in the profession: this Mr. Cobb himself unwittingly discloses; his motive must, therefore, be obvious. Wishing him joy, then, of seeing himself in the majesty of print, let us see what Mr. Liston has to say upon the subject of Lithotomy. Yes, there is something tangible here—something that does not slip through the meshes of the memory. Infiltration of urine is, as

Mr. Liston justly observes, a frequent cause of death after the operation of lithotomy. The intention of the paper before us is to guard against this serious evil. We shall give Mr. Liston's instructions to this effect in an abridged form:—

"Infiltration," he says, "may occur,—first, because the incisions externally are made too high, thereby having no dependant passage for the escape of the urine; second, from a want of correspondence between the external and internal incisions; third, from keeping the patient's thighs in close apposition by bandages, as is sometimes done; fourth, this fatal consequence may arise from an inflammation of the parietes of the wounds. Coagula of blood, when much violence has been used in extraction, may also produce this effect. From one or other of these causes it often happens that no urine is found to pass after the operation. The preliminary incisions are to be made with a sharp-pointed knife, and the patient not to be detained on the table for more than about three minutes."

We doubt much whether this section of our author's advice will be complied with on all occasions, and by all operators. What he says of instruments is singularly bold, and perhaps equally true—"It is a matter of perfect indifference of what description they are, provided the incisions be well made." We perfectly agree with this talented remark, for the man who cannot operate for the stone without a cutler's shop at his elbow had much better let such matters alone. Mr. Liston now comes to the object of his sensible paper, the prevention of infiltration of urine, by introducing an elastic tube through the wound into the bladder. He has been in the habit of using, for this purpose,—"a piece of œsophagus tube for adults, about five and a half inches long, and from two-eighths to three-eighths of an inch in diameter, perforated by a common punch, with a few holes at the end, which is to be inserted into the bladder. The ends of the tube are to be preferred, as being more smooth than the cut surfaces. This tube should be introduced immediately after the operation, and be kept free from coagula by a probe occasionally passed through it. The tube is not to be withdrawn until the track of the wound is consolidated. He has generally retained it for four days, but has sometimes taken it away on the second. This method he has adopted with success in a variety of cases, even with some advanced in years." Mr. Liston, we are told, ranks high amongst the lithotomists of the day: his observations should command respect and experience an impartial trial.

The fourth article, by a Mr. T. A. Robinson, Edinburgh, is made up of some trite remarks on Iritis. We do not think that this "dispenser of light" has fulfilled his high destiny in the present instance. His paper might be considered a tolerable exercise for an ophthalmic student, but certainly a meagre production for an experienced oculist. He must, therefore, pardon us for not making his "darkness visible."

A singular case of Hysteric Cough is next detailed, by a Mr. Sinclair. The patient, a servant aged 18, had had rheumatism of the head, with a slight pyrexia. After several days, during which the complaint remained stationary, a blister was applied be-

hind the ear. On the second day after this, Mr. Sinclair was called in a second time, and finding her much exhausted, with severe pain of the head, he ordered fifty drops of laudanum to be taken in some water. On taking this opiate, she was seized with a paroxysm of coughing, that continued without intermission for a long time. An hour after, some warm gruel was recommended to allay the cough. The following night the fits of coughing recurred every two minutes. On the following morning opium lozenges were ordered, but produced no relief. Twelve ounces of blood were next taken from her arm; syncope was induced, and the symptoms still aggravated. Having now discovered that she had, some time before, been affected by hysteria, an emetic was prescribed, to be followed up by a dose of glauber salts; both medicines operated well, but without any remission of the disease. A mixture, composed of sulphuric æther and aromatic spirit of ammonia, was then given, but the cough continuing, a draught of the tinctures of opium and asafœtida were ordered. Still there was no abatement of the symptoms, and the ammoniated tincture of valerian, and grain doses of opium, were next prescribed; calomel and jalap to be given the next morning, and repeated after six hours, if necessary. The antispasmodics having failed, an infusion of sennæ was ordered, which effected as speedy a cure as if Hohenloe himself had shaken his beads over the afflicted girl.

Who comes next on the lis t of candidates for the three-months' immortality of a quarterly journal? Mr. Braid, of Leadenhills! a saturnine essay upon the "Colica Pictonum," for a ducat; no, *egad!* as friend Abernethy saith, we are mistaken, the man talketh not of lead, but of a "case of peculiar ulcerous affection, successfully treated, with observations."—Mr. Braid may rest perfectly satisfied that there was nothing whatever peculiar in his case. The complaint he describes is to be seen occasionally in every hospital; it was nothing more or less than "noli me tangere" of an erratic nature. We must, however, give our readers the advantage of knowing the successful treatment adopted in this case. It simply consists in isolating the ulcer by repeated applications of the nitrate of silver, which he was obliged to use in consequence of the patient refusing to have the sore circumvallated by the scalpel. The principle of this operation would seem to be, to prevent absorption, and thereby check the progress of the disease.

Turning over another leaf of this most instructive volume, we find a "History of a case of Calculus in the bladder," signed Mr. Averil. We could venture to affirm, at the distance of some hundred miles from Cheltenham, the residence of our historian, that this is one of his first cases of lithotomy. Besides the juvenile air that breathes around this history, you have all that complacency consequent to an unexpected triumph over the difficulties of an operation to which the undertaker seems a stranger. At the commencement of the detail, the reader is prepared for something very

interesting, just as the little patient was by a course of physic, but, by the time he goes over the history, he finds the whole affair a mere "flourish of trumpets, and then steps in Tom Thumb."

Who will deny, after reading the following announcement, but that this is the age of invention? "A case in which a *new method* of performing the lateral operation was adopted with success," by Mr. Wilkinson, of Limerick.

"——— redeunt saturnia regna,"
Jam nova progenies cœlo demittitur alto."

All will go right immediately. But, reader, would you guess in what this new method, &c. consists—why, we shall inform you in the author's own words, lest any of the spirit of the invention should evaporate in our hands:—

"Having divided the parts in the usual way as for the lateral operation, I cut into the groove of the staff, through the membranous portion of the urethra, and having reached the neck of the bladder, I exchanged my scalpel for a curved bistoury with a button point, fitting to the groove of the staff; it had also a sharp point, which was moveable. Having passed this instrument along the groove of the staff into the bladder, I felt in the external wound for the button of the bistoury, and having fixed it in a position deemed favourable, I pushed forward the moveable point through the bladder upon my finger, and then withdrew the knife in a direction corresponding with the external wound."

Mighty clever, for a provincial! on such easy terms can originality be claimed, as the exchanging of one instrument for another, or the modification of a bistoury!

From the Shannon we must hasten to the Boyne, where we find a Mr. Fisher working miracles by mercury. This article is entitled, "A case of Hydrocephalus cured by Mercury;" to which he has accurately appended a letter with his various titles, M. G. S. L. H. P. 6th Dragoons, and dates his precious farrago of folly at Navan, county of Meath, Ireland. We are surprised he did not add the names of the parish and barony, lest any doubt should exist of his residence. This case of hydrocephalus, we are told by the writer, had the usual symptoms; was neglected in the incipient stages; and when Mr. Fisher was called in, was much aggravated. The usual remedies were first tried by him, such as bleeding, blistering, and purging. Calomel and mercurial inunctions were next tried, to which the cure is attributed, without taking into account what assistance was derived from other remedies, or considering whether it was a case of hydrocephalus at all. We are much inclined to think it was not. So much for this "man of war."

A case of Staphyloma Sclerotic, detailed at some length and with great minuteness, by Dr. Maitland, informs us how often the eye may be tapped with impunity, being operated on, in this instance, no less than thirty-three times, from the 30th of May to the 15th of September. The operation invariably afforded relief, by evacuating the vitrous humour, which was morbidly increased in quantity and degenerated in kind. The *rationale* of the matter is, the lessening of distension. The principle once

known, its application, when necessary, will follow. The writer thinks the same practice might be adopted with advantage in the early stages of staphyloma of the cornea.

Dr. Borthwick presents himself to our notice, in a paper on the effects of Costiveness. Two cases are related, which redound to his credit; the first, a lady, suspected of having a consumptive affection, was treated by her medical attendants accordingly, and when their prescriptions failed, she was ordered out on a mission of health to Madeira, from which she derived some benefit. On returning home, however, the pseudo-phthisical complaint made its appearance a second time, when Dr. Borthwick was called in, and finding that she was habitually costive, her pulse seventy-six, adnata suffused with bile, tongue loaded, bitter taste of the mouth, no appetite, &c. he ordered her some aperient medicine, which, *mirabile dictu*, soon restored the patient to health! The other case was that of a female, who was affected with constipation of the bowels, for which the doctor informs us he prescribed a dose of castor oil; but not producing the necessary effect, he ordered fifteen grains of the extract of colocynth to be given every third hour, and in the intervals a wine-glassful of a solution of Epsom salts in peppermint-water. Here, too, we are overwhelmed with a cure, as something extraordinary. Success of any kind intoxicates some men; it is more than they can bear, and they turn to throw off a burthen that seems not to sit easy on them.

Mr. Crowfoot's case of "Fungoid Tumour of the Uterus" brings us nearly to the conclusion. The dissection of this melancholy case cannot well be said to warrant publication. Had an operation been performed in the first instance, which measure, we believe, might have been adopted with some prospect of success, the result of such a proceeding would have afforded an instructive lesson. Such an expedient, we think, might be justifiable or prudent, and from the nature of the symptoms discovered upon the first examination they were as follows:—

"Mrs. B. now consented to an examination, for the first time, *per vaginam*. The *os uteri* was found to be slightly dilated, and harder than natural; a small but firm tumour was discovered on the posterior side of the *cervix uteri*, from which it apparently rose; neither the tumour nor the *os uteri* were found very sensible to the touch."

Was this a case for operation? some would say no.

An extraordinary case of Tetanus, treated with much judgment and decision by Dr. Brandreth, of Liverpool, brings the fifteen "Original Communications" to a tragical termination. The patient was first bled; acetate of morphia and warm water, as recommended by Dr. Booth, were injected into the veins, and produced a temporary relief. Dissection presented the following appearances:—

"Vessels of the dura mater gorged with blood; brain firm, and studded with red points; choroid plexus unusually tinged; cerebellum vascular; part of the cinereticus substance in a pulpy state; blood coagulated in the lateral sinuses; on lowering the head, a quantity of fluid escaped from the spinal column; cellular membrane

around the throat distended with air; small intestines inflated with air, and marks of incipient inflammation all over their surface; omentum and colon quite out of sight, the latter very much knotted; a large perforation in the stomach, from which a quantity of clear fluid was poured into the abdomen; pericardium vascular; right auricle and ventricle distended with coagula, the left entirely empty; cellular membrane around the aorta filled with air; pharynx and trachea highly inflamed; lower part of the œsophagus deprived of its mucous membrane; other large viscera showed no traces of diseased action."

We have now gone through the "Original Correspondence" of this profound Journal, with the exception of one paper, consisting of a series of experiments on the detection of Corrosive Sublimate, so closely catenated, that a link could not be broken in the chain without destroying the whole of the author's investigation; and the reflections excited by the performance of this task are by no means favourable to the taste, talent, and good sense of the writers of these lucubrations. Our philanthropy, however, is of too enduring a nature to be scared, by our present collision with these stupid essays, from undertaking with cheerfulness the same charitable duty of castigation at a future period; we promise, therefore, that so often as the "Edinburgh Medical and Surgical Journal" shall come forth we will serve up a portion of its contents to our readers, with suitable sauce of disapprobation or applause, as the "barometer" shall indicate. "Othello's occupation's gone," indeed, with that wishy-washy-compromise of milk-and-water correspondents, who have too long been suffered to post their "genteel advertisements" in the pages of the journals of the age, for in no other light can we consider these productions, but as so many sign-boards hung out to invite the unwary afflicted to the dwellings of men, where they are sure to find any thing but honest treatment and a cure.

"Quos ego—Sed motos præstat componere fluctus.
Post mihi non simili pœna commissa luetis."

Our trident shall be strenuously exerted to clear the deep of these "privateers."

FOREIGN DEPARTMENT.

ANALYSIS OF FOREIGN MEDICAL JOURNALS.

REVUE MEDICALE—DEC.

Case of a wound of the right carotid artery, cured by frequent bleedings, the application of ice, and the internal use of digitalis. By Professor DELPECH.

A sergeant of a foot regiment, aged about 21 years, received, on the 13th of July 1824, a wound made with a double-edged sword, whilst engaged in single combat. The sword penetrated immediately above the articulation of the right clavicle with the sternum, passing at the same time from above downwards, the wound being received whilst the combatant was in the act of stooping forwards. A copious hæmorrhage of arterial blood followed, which produced, in a short time, a state of complete syncope. They bound some handkerchiefs about his neck and the upper part of his chest, in such a way as to exercise a very forcible compression, and in that state they took the wounded man to the hospital of St. Eloi.

We saw the patient in half an hour after; at that time the syncope had ceased, and he had rejected the whole of the contents of his stomach; he was pale and feeble; the pulse was very weak and irregular; and the pulsations of the heart were very strong and extended. The wound of the skin was raised by a mass of coagulated blood, which had been forced between the edges of the wound. A considerable swelling occupied the anterior and lateral regions of the neck, extending even above the larynx to the angles of the lower jaw; it was even more extensive below, and the most prominent part of the tumour corresponded to the situation of the wound. Very distinct pulsations could be observed in the swelling, attended by a sensible increase of its bulk, and not mere impulses given to the mass of the coagulated blood. Every portion of the skin of the neck thus raised was bluish or mottled. It was easy to see that some large artery must have been wounded; the situation of the wound, its direction, the shape of the swelling, and its rapid increase, appeared to point out, that either the arteria innominata, or the trunk of the right carotid, had been penetrated. In either case, the injured vessel was situated so far below the upper edge of the sternum, that it was impossible to perform a dissection to secure the vessel by ligature, with any chance of success. The blood had been stopped by the formation of a *thrombus*, and as it appeared unsafe to attempt to secure the vessel so low down, it became more advisable to preserve the existing state of things, precarious even as they were. A coagulum appeared at the wound, and had, by the impetus given to it by the bleeding vessel, separated its edges. It was very clear that the blood which had escaped from the bleeding vessel had only found its way through the external wound for a few moments, for immediately that the direct communication was destroyed between the external and internal wounds, the blood was driven with great force into the surrounding cellular tissue, from which it had gradually proceeded until it met with the resistance of the skin, whilst the blood immediately surrounding the wound in the vessel must have remained fluid from the continued stream in which it was poured out. It is evident then, that the least change in the situation of the coagulum, near the external wound, would immediately have renewed the hæmorrhage. The only hope we had of success was by attempting a union of the external wound, by keeping up a gentle pressure upon the coagulum, taking care, however, not to use too much force, as that would only tend to disturb the slight adhesions which might have taken place. The neck and chest were left uncovered, and some pupils were directed to make pressure by putting two fingers over the wound, and to relieve each other every hour.

The patient was placed in bed, his head and shoulders being raised by pillows. He was immediately bled from the arm to *twenty ounces*. The whole of the neck was covered with a linen bag containing pieces of ice, and this application was renewed every hour. We prescribed iced lemonade as a drink. This bleeding was performed at *half past nine* in the evening, which had the effect of very much lowering the pulse, and it was directed to be repeated as soon as the pulse should rise again.

At *one* o'clock in the morning the patient complained of great pain at the top of the sternum and clavicles, accompanied with a feeling of oppression and anxiety, and some attempts to cough, which he resisted with great difficulty. The pulse rose and the pulsations of the heart were again very strong. A second bleeding was ordered, to the amount of *twelve ounces*.

At *three* o'clock a. m. the pulse had again acquired some resistance, and *twelve ounces* of blood were abstracted. At *seven* a. m. the time of my usual visit in the morning, the same state of the pulse had returned, and *ten ounces* of blood were taken away.

At *eleven* o'clock a. m. V. S. ad ʒ x. At *one* p. m. V. S. rep. ʒ viij. when he was also directed to take two grains of the *digitalis purpurea*, to be repeated every two hours, in a cup of the infusion of the flowers of *tilleul*. At *four* p. m. the pulse was again strong and frequent, and the pulsa-

tions of the heart had lost nothing of their force or extent. The oppression and pains about the sternum, which had diminished since the morning, had appeared afresh. The tumour itself increased; it had become very large indeed, extending even from the sternum to the ears, and the pulsations in it were quite terrific; the coagulum had been driven with much force between the lips of the wound, and presented a projection of several lines. Pressure was still made upon the mass of coagulum by bandages, and by the hands of the students appointed to watch the patient. Ordered *two grains of digitalis every hour*; also, *a seventh bleeding to ten ounces.*

At *nine* p.m. a fresh excitement took place; severe pains in the sternum, pulse harder and frequent. The *eighth bleeding* was ordered, at which *eight ounces* were extracted. At *one*, in the morning of the 15th, the pulsations of the heart were strong and forcible, and the pulsations in the tumour became very troublesome, when he was again bled to *six ounces.* At *seven* he was again bled to *eight ounces*, and three grains of digitalis ordered to be taken every hour. At *three* p.m. the pulse again rose in force, although it did not become more frequent, being then 50. The pains about the sternum again returned. The tumour is soft in that part only near the wound, and it is clear that in every other part it is become coagulated, and the pulsations are more easily distinguished in its lower part. *Ten ounces of blood* were taken from the opposite arm, and the three grains of digitalis continued every hour. The night was passed calmly, and the patient had some sleep.

On the 16th, at seven in the morning, the pulsations in the radial artery were 55 and very feeble, but those of the heart remained strong, and were accompanied by pains in all the left side of the chest. The hardness of the tumour had increased, and the throbbing had become less marked in its circumference. Bleeding repeated to *eight ounces*, and the digitalis reduced to two grains every hour. At *seven* p.m. the pulsation had again become strong, although not beyond 50, and he was bled to *ten ounces.*

17th, at seven in the morning, the pulse was 41 in a minute, weak, irregular, and slightly intermittent. The extravasation had extended itself; the respiration become more free; but the patient complained of cardialgia, especially after having taken the digitalis. At two p.m. the pulse rose in force and frequency, and *eight ounces of blood* were drawn.

On the 18th, at seven in the morning, the pulse was rather below forty-five pulsations in the minute; cardialgia and vomiting. Absorption had taken place in the upper part of the swelling, and the coagulum at the wound had become solid and adherent. At 2 p.m. the pulse firm. V. S. to *eight ounces.* On the 19th, the pulse was small and slow, and there was some vomiting. On the 20th, the state of the patient was very satisfactory on all points, but he rejected the digitalis, and therefore it was ordered to be suspended.

On the 21st, 22d, 23d, and 24th, he remained in the same state. Emollient injections were occasionally used. The tumour diminished gradually, and the throbbing in it became more obscure. The ice was not applied on these days. The coagulum began to be loosened from the external wound, and as there was an access of fever in the evening, he was again bled to *twelve ounces.*

On the 25th, the applications of the ice were renewed. Five grains of the *sulphate of quinine* were ordered to be taken at dwo doses during the morning. The external coagulum is more detached, and a large quantity of decomposed blood has escaped. On the 26th, no further alteration. He took three grains of the sulphate of quinine during the morning. No access of fever at night. The 27th, 28th, or 29th, decomposed blood continued to flow from the wound, mixed with pus. The patient has pain in the swelling, and it is evident that the suppurative inflammation has commenced in the sides of the cavity that contains the coagulum. Twelve leeches were applied to the most sensible part of the swelling, and afterwards twenty, in order to check the inflammation in the interior of the sac.

30th. At three p. m. a hæmorrhage occurred. The student, who had the care of the patient, raised the dressing, and about four ounces of arterial blood escaped in a large jet, directed from below upwards. He immediately closed the wound with a fresh plug of agaric. The blood ceased to flow, but it had filled the cavity first produced by the hæmorrhage, and produced great pain by the distension of its parietes. At seven in the evening, the pulse was so firm as to require a further bleeding to *four ounces*. The applications of ice were renewed, and two grains of digitalis again taken every hour. In the night a fresh hæmorrhage took place, which was speedily suppressed by compression, but the volume and the pains in the tumour increased. The whole of the neck, from the top of the shoulder to the ear, and the base of the lower jaw, became very much distended, but without being livid.

31st. At seven in the morning, twenty-four leeches were applied to the most painful part of the swelling, and produced relief.

August 1. The tension produced by the extravasation of blood had extended to the front of the clavicles and sternum, and had then become very painful. Ten leeches were applied on each side of the swelling, and procured relief. The flow of the decomposed blood and pus continued from the wound.

2d. Acute pain just over the sternum, to which six leeches were applied. 5th. Violent palpitations of the heart and quickened pulse. A mixture was prescribed, containing 24 grains of digitalis in six ounces of fluid, of which the patient was directed to take a table spoonful every hour. The night was passed quietly.

6th. The same medicine was continued, the flow of pus from the wound became more copious, and it was necessary to enlarge the external wound a little, to allow of the exit of the loose portions of coagulum.

7th. The tumour had sensibly diminished, and its sides approached each other. The patient is comfortable, and asked for some nourishment. The mixture, and the application of it, were discontinued. He was allowed two ounces of soup.

From the 8th to the 12th, the suppuration became more and more abundant, and the wound reqnired frequent dressings in the course of the day. The patient was gradually allowed more broth and some rice.

The patient's improvement from this time was rapid; the pulsations in the tumour gradually became less distinct; the tumour itself became smaller and firmer; and the discharge of pus became less and less. A sensation of throbbing still remains very distinct to the feelings of the patient in the situation of the wound. The pulsations of the right carotid artery, are very much less than those of the left. The patient was allowed some more substantial food, which appeared to agree with him very well.

Towards the end of September, the strength of the patient had very much returned; he left his bed, and could take a little exercise. The wound cicatrized; but when you laid your finger on it, you could distinctly feel a pulsation, accompanied by a noise similar to that produced by the passage of the blood from an artery into a vein.

The patient left the Hospital on the third of October, as perfectly cured as it was possible that a man so seriously wounded could be; receiving at the same time our advice that he should keep himself as quiet as he could, not to use any great exertion of voice, or fall into any of the habits that would accelerate the circulation to any great degree.

By the large quantity of blood lost, amounting to 170 ounces, besides that drawn by the application of the leeches, the life of the patient was preserved, aided by the sedative effects of the digitalis, given in much larger doses than have ever been tried in this country, joined to the judicious application of compression, and the local application of the ice.

THE HISTORY OF MARSHES,

And of the Diseases caused by the emanations from Stagnant Waters.

A very interesting volume has been published on these subjects by Dr. MONFALCON, of Lyons, which has been honoured with the prizes of the two Royal Societies of Medicine of France, and has excited in that country a general interest.

The work is announced as a complete treatise on marshes, lakes, and the diseases to which the emanations proceeding from them principally give rise. It contains also a correct description of the fevers which prevail near those insalubrious places, and an account of the method which should be pursued for the melioration of the physical and moral condition of the inhabitants of those countries in which the stagnant waters abound. The principal questions which at present agitate the medical world are considered with particular attention, especially those of the contagious nature of fevers, and the production of remittent and intermittent fevers. These subjects are very important, and if the author's observations tend to elucidate the contagious, or noncontagious nature of fevers, arising especially from the influence of malaria, or marsh effluvia, they cannot fail at once to interest and benefit mankind.

The introduction to the work treats of the physical and moral character of the inhabitants of marshy countries, and the general appearance of such districts. The book is divided into four parts; the *first*, giving an explanation of facts. The *second* part is on the action or influence of those marsh effluvia on organization, physiologically and pathologically. The *third* part contains the inferences drawn from these facts; and the *fourth* treats of the *hygiene* and therapeutics.

This work will, we have no doubt, be very soon translated into English; but if it be not, we intend to give an analysis of the French edition. Judging from the parts of it with which we have been furnished, we think it will well repay the reader for the time which he may devote to its perusal.

PRIZE PROPOSED.

The Royal Academy of Sciences, Belles-Lettres, and Arts, of Rouen, proposes as a prize subject, to be decided in the public sitting of 1825, the best answer to the following question:—

Has experience proved that leeches when applied to the head, the thorax, or abdomen, act in any other way than by the mere bleeding on the diseased organs contained in those cavities.

The prize is to be a gold medal of the value of 300 francs, and the papers must be addressed to the Secretary before the first of June.

HURTFUL INFLUENCE OF BAKERS' BREAD.

[*From a Correspondent.*]

A physician, of extensive practice and long experience, has made the following remark: That out of fifty cases of indigestion and its consequent calamities, thirty-nine, on an average, may be cured by obliging the patient to use home-made bread, instead of that which is made by the baker. The writer of this article, also a medical man, can confirm, from his own experience as well as an extensive practice, the truth of the above remark, communicated to him by a brother physician. Bakers' bread is a perfectly *sui generis* substance, and is unlike any other bread. It always contains a portion of alum and the subcarbonate of potash, and some other unknown ingredient. The proof of good bread is its keeping. Country bread will keep good a week, and this is a better test of the genuineness of bread than the usual test employed for alum. Bakers' bread binds the bowels, and produces nervous disorders, in many persons, of an alarming kind, and the writer well remembers the improved health enjoyed by the students of the college at which he was educated, after the medical professor had forbidden the use of bakers' bread, and an oven had been erected for the college baking.

SIR ASTLEY COPER AND THE BOROUGH PUPILS.

SIR ASTLEY COOPER, after having been a Lecturer on Surgery at St. Thomas' Hospital almost thirty years, has felt it necessary to resign the important duties connected with that office to others, who, being much younger in life, are more competent, physically, to discharge those duties, and with whose scientific qualifications he is sufficiently satisfied to appoint them his successors.

It has been the practice, at the Borough school, to present each of the lecturers with a piece of plate on his resignation; and a meeting of the pupils was called to consider of the propriety of presenting Sir Astley with a similar proof of their respect. The meeting was held, and the proposition was negatived. The truth of the matter is this: the pupils now attending the practice of the Borough Hospitals feel themselves aggrieved, because Sir Astley announced, by advertisement, his intention of continuing the anatomical lectures *jointly* with Mr. Green. This has not been done, and we believe the indisposition of the worthy Baronet has been the principal cause of the non-performance of his pledge. Many of the pupils say, "we have not had the pleasure even of hearing Sir Astley once, and why should we become subscribers to a piece of plate?"

It is then, simply, because the students have not been made acquainted with the causes of the sudden resignation of Sir Astley as a lecturer, *in propria forma*, after his name had appeared in the advertisement, that they have to complain, and on this account only has any public opposition been manifested to the proposed measure.

We understand that, at a subsequent meeting, a paper was handed round for those gentlemen to subscribe who felt inclined, which was afterwards directed to be left at Mr. Cox's library for signatures.

ERINENSIS AND MR. CRAMPTON.

To the Editor of THE LANCET.

SIR,

"Preserve me from my friends, and I will protect myself against my enemies," is a frequent remark, when one man, with more zeal than discretion, steps forward in defence of another. To Mr. Philip Crampton, perhaps, this remark will occur, when he peruses the following answer to the letter of ERINENSIS, in your paper of the 8th ult. That letter, however, although written with considerable humour and ability, seems to be so much tainted with mild ill-nature and misrepresentation, as imperiously to call for a reply; for, whilst I can smile at the ludicrous description of Mr. C's hunting equipment, it is but justice not to treat flagrant errors, in graver matters, with neglect.

The first point to which I beg leave to call the attention of your readers is, the sneer conveyed in the observation of Erinensis, in regard to the utter worthlessness of a splendid lineage being peculiarly illustrated by Mr. C's elevation to the highest rank in the surgical profession, not merely "without one drop of noble blood in his veins," but even without any personal means, or any pretensions whatever, from ancestry or immediate parentage, to mix in respectable society: this statement, being in every respect incorrect, ought not to pass unnoticed and uncontradicted, as the public is more or less interested in ascertaining the real biography of every man whose character and station render him conspicuous. I pledge myself, therefore, to the general accuracy of the following circumstances, respecting Mr. Crampton and his family, whom I have known intimately from my earliest youth.

Mr. Crampton's father, who married the sister of the late Colonel Verner, of Churchill, the head of one of the most ancient families in the county of Armagh, was the third son of the Rev. Mr. Crampton, Archdeacon of Tuam, by his wife, the honourable Miss Twisleton, sister of Lord Say and

Sele. He was educated for the surgical profession under the late George Daunt, the most eminent man of his day, in Dublin, but having turned his attention more particularly to the diseases of the teeth, he set up as a dentist in Dublin, and in that capacity, as well as in his general character, was so highly respected, that he mixed in the best society, and amassed a very considerable sum for those days, as he bequeathed to his eldest son an independent fortune, and to his younger children the sum of 2,000*l.* each. Soon after his death, in 1794, Philip, the youngest son, and the subject of this memoir, being then 14 years of age, was placed with the late Mr. Richards, a very eminent surgeon; but completed his education in Edinburgh and London, whence he was recalled to Dublin, by the rebellion of 1798, when he was appointed an Hospital mate,* and was attached to the forces under Sir John Moore; he shortly after volunteered for service in Holland, but, on his way to join, was stopped by the convention of Alkmaer.

In 1799 he returned to Edinburgh, and graduated there in the year following, when he went back to Dublin, where he passed the College of Surgeons. About this time, as Erinensis, I believe, truly observes, he danced himself into the good graces of his present wife, whose "face was her fortune," being the eighth daughter of an officer of dragoons. Having settled in Dublin, he certainly did give a course of lectures, as Erinensis facetiously observes, in a HAY-LOFT, which was the STABLE foundation of his future fame and fortune. In 1806, Mr. C. was appointed surgeon to the Lock Hospital, and from that date continued to give lectures on anatomy and surgery to a large class of advanced students, until 1813, when he was appointed surgeon-general by the late Duke of Richmond, on whose choice neither the flexibility of Mr. C.'s temper, nor the suavity of his manners, nor his companionable pleasantry could have had an influence, as supposed by Erinensis, because, until this appointment, he had never even seen his grace, except in public.

That the marriage of Mr. Bushe, now the chief justice of the Irish Court of King's Bench, with Mr. Crampton's sister, may, by enlarging his connexions, have contributed to the extension of his practice, is extremely probable; but it is not true, as Erinensis insinuates, that Mr. C. is mainly indebted to his brother-in-law for the advancement of his fortune, as he was afloat, and in deep water, at least as early as Mr. Bushe, who, in a playful moment, is said to have suggested a motto for the TREPANNING instrument.

"The times have been, that when
the brains were out,
The man would die."

It appears then, that Mr. C. has been in the profession for 25 years, and, for the last 15, in full practice, and I will venture to assert, without a single stain on his good name. This, of itself, may be considered to be a fair test of his real merit. To his birth it also appears that he owes many valuable friends, and to his acquired connexions still more; but it is to his own talents and exertions that he is solely indebted for his present reputation. Accident may indeed bring a man into notice, and give him a temporary celebrity, but, in a large city like Dublin, to establish and maintain a great character for knowledge, judgment, and skill, in an ardnous profession, with numerous competitors, demands higher qualifications than those to which Erinensis attributes Mr. C.'s success in life, namely, a good address, elegant manners, and a graceful person, aided by a specious style, and a courtier's pliability.

I have to apologize for occupying so much of your very valuable paper, but I cannot conclude without stating that there is no foundation whatever for the story told by Erinensis, in regard to Mr. Crampton's introduction at Court by Lord Whitworth, as he was never presented to the King, ex-

* Sir Everard Home, Sir James M'Gregor, and many other celebrated professional characters, commenced their career in the same line.

cept on the late occasion of the Royal visit to Ireland, when he was honoured by His Majesty with a most gracious reception, and had a professional mark of favour conferred upon him.

I am, Sir,
Your obedient servant,
A CONSTANT READER.

Feb. 1825.

A NEW VERMIFUGE.

To the Editor of THE LANCET.

SIR,—In the review of Doctor DUNGLISON'S work, in your last number, I find several columns devoted to the subject of Intestinal Worms.

According to Doctor Good,—"A decisive vermifuge is yet a desideratum in medical practice; for, first, worms lie for the most part so low in the intestines, or are so completely involved in viscid mucus, or other slime, that medicines seldom go home to them when within the body; and next, most of the medicines that promise fairest to produce effect upon them have a tendency to weaken the action of the stomach, &c." So that, says Doctor Heberden, "till some more certain remedy shall be discovered, nothing will be more serviceable than to keep the bowels loose."

The symptoms of intestinal worms I need not here reiterate; nor will I intrude on your pages, or on the reader's patience, by showing how injurious and inefficient most of the remedies prove which are usually employed in this disorder, frequently producing effects but little inferior to the disease itself; nor shall I say much on what I conceive to be the *modus operandi* of the medicine, if it may be so called, which I have to propose as a decided vermifuge. Do not, however, Mr. Editor, charge me with using somewhat like oracular language, when I affirm, that almost every case of worms, if not every case, may be cured by the internal exhibition of *finely-powdered glass*.

I have been in the habit of using this substance for many years, in the treatment both of children and adults, with uniform success. In cases where symptoms of irritation in the intestinal canal exist, and which are more readily to be detected by a careful observer than to be expressed in words, I have found the powder of glass, given as shall be presently mentioned, accompanied by the most marked improvement of health.

The utility of this substance, employed as a medicine, I conceive, depends wholly on its mechanical stimulus, and as such, its superiority to every other remedy of its class, to the numerous angles which every particle of the glass, though extremely small, must possess: its advantages over the *dolichos pruriens*, it is obvious, arise from the unyielding nature of the substance itself. I do not consider this agent merely as expelling worms, but also as a healthy stimulus (acting mechanically of course) to the minute vessels opening on the internal surface of the intestines, and producing that state of those parts which is known to be incompatible with the production of parasites.

It will be necessary here to remark, that glass has been supposed to be of the number of those bodies "which, when administered in the form of

powder, so lacerate the membranes of the stomach by the sharpness of their particles, as slowly to destroy life." Several authorities are quoted by that very respectable writer, Doctor Paris, in his valuable works on Pharmacologia and Medical Jnrisprudence, both for and against this opinion. I must, however, repeat, that I have given this substance in numerous cases of worms, and in that state of the bowels which appeared to me favourable for their production, with the most perfect success; and with this further advantage to the patients, that in no instance was any particular regimen required, nor was any effect produced, but that arising from a speedy return of health. So decidedly beneficial have I found the powder of glass, in many of the masked forms of disease, that I seldom use any other medicine with my own children.

In children, it is sufficient to give them two scruples every morning for a week; a few grains of calomel may be included in the last paper to be taken, but this is not essential to its success. I must not here omit to mention the case of a merchant, whom I had under my care in Calcutta, to whom I gave about double the quantity every morning, during the time mentioned, and succeeded in removing a most distressing case of worms. On my quitting India, I furnished him with a quantity of the medicine, at his urgent request, as he would on no account be without it.

Having received much information, Mr. Editor, from your widely-circulated journal, I cannot better acknowledge my obligations than by availing myself of the same medium to introduce to the profession the knowledge of a substance which, as far as I know, has been regarded hitherto only as a poison, but which my experience has proved to be, not only the safest remedy, but, I may say, a specific for one of those disorders which have frequently baffled the skill of some of our most able physicians.

I deem it a duty, Mr. Editor, to discountenance *quackery*, although so extensively patronized under the name of "Patent Medicines." Justice, however, requires, that I should explain how I became acquainted with the powdered glass, as a remedy: it is the basis of the nostrum sold under the name of "Pritchett's Vegetable Worm Powders," and said to be "the discovery of really a medical practitioner, in extensive private practice." Allowing this to be the case, he knows best why he has kept as a secret what should be the property of the profession. Any one who will be at the trouble of purchasing a small packet of these powders, which the inventor, or his agent, says are "a compound, produced from the calx or ash of certain vegetables," and of submitting a small portion of one of the powders to the action of the blow-pipe, he will find, that this said vegetable ash turns out neither more nor less than a globule of glass.

I am, sir,
Your humble servant,

W. Johns, M.D. F.R.S.

Manchester, 14, Oxford Road,
February 1, 1825.

HOSPITAL REPORTS.

GUY'S HOSPITAL.

C. D., aged 45, in Dorcas ward, was admitted into this hospital on the 19th of last month, with an extensive swelling situated in the neighbourhood of the right ancle joint. It appears that about 16 years since she received a severe blow and strain of this joint, totally disabling her from using any exercise; the limb was extremely painful and swollen. Her medical attendant used every means, such as rest, spare diet, keeping the bowels freely open, leeches, and cold washes to remedy the mischief, and after a long confinement and keeping her limb at complete rest, she was enabled gradually to get about, having, as she considered, completely recovered from the effects of the injury. Although exercise did not produce pain or inconvenience, yet she says, that there always remained a slight puffiness or swelling immediately over the outer ancle, which, however, gave no pain or trouble. In this state she continued, using strong exercise, and taking no notice of the swelling or joint until about four or five years since, when she was unfortunate enough to receive rather a severe blow immediately upon the seat of the former injury. It caused her to have great pain, but there was much inflammation or general swelling; the pain was of a constant acute nature. From this period the original swelling gradually increased, until it reached the size of a common hen's egg. After being again confined for some time, and using every means to alleviate the pain and swelling, she was at last enabled to use her limb again; still, however, she was far from being free from pain. She was enabled to move about until three months since, when the tumour again began rapidly to swell, and continued to do so up to the period of her admission here. At this time the tumour extended from just behind the outer malleolus, forwards, entirely round the fore part of the leg, to near the anterior part of the inner malleolus, considerably distending the integuments, and passing down upon the upper parts of the tarsal bones, where it had the appearance of overlapping them. The integuments were of a natural colour, there was not very severe pain, excepting when the tumour was handled, when it gave a sensation of a soft crackling sort of feel. She was directed to apply the spirit wash, and to keep constantly in bed. She continued in this state up to the 27th, when the tumour again began to enlarge, accompanied with great pain; her skin was hot, her pulse quick, and tongue furred and dry; she had lost all appetite, and her nights were disturbed and restless. In fact, a most extreme degree of high constitutional excitement had supervened, accompanied with the integuments of the swelling generally having become highly discoloured, and two or three local patches of an irritable inflammatory nature, most probably immediately forerunning ulceration. In this state, when it was evident that the disease was of a highly malignant nature; and the constitution, which till this time had discovered no signs of disturbance, having now become extremely irritable, and her general health greatly disturbed; it was determined by Mr. KEY to advise her to submit to having the limb removed, to which she consented, and the operation was accordingly performed on the 2d of this month, by Mr. KEY.

Operation.

The tourniquet having been applied, Mr. KEY made a circular incision through the integuments, about five inches below the knee. He now everted these parts for about an inch and a half, dissecting them off from the superficial layer of muscles; he then made a second incision, directly at the base of the everted skin, through the superficial muscles, after which, he divided those deeper seated, with the catlin he also divided the interossei, and then placing himself on the inner side of the limb, commenced sawing through the tibia and fibula. Ligatures were applied to the three principal arteries, and the edges of the wound brought together, the line of union being from before, backwards. By

everting the integuments in the first steps of the operation, Mr. KEY secured to himself plenty of integuments, and made a large cushion over the extremities of the bones. The patient has since done remarkably well, and the stump looks extremely healthy.

Dissection.

The diseased limb was afterwards very accurately examined by Mr. KEY, who stated that it appeared to be a fungous excrescence proceeding from the extremity of the fibula, having its origin in the cancellated structure of that bone. There appeared on the outer part of the tumour a most perfect wall of bone, extending, from above, an inch on the tumour; and this state of parts would, in a great measure, account for the long and gradual formation of the disease. The tumour did not appear, as its external appearance would seem to indicate, to be composed of one uniform mass, but in reality to consist of three portions, one proceeding from the back part of the outer malleolus; a second, the largest, from the outer side of that process; and a third from the inner and fore part, or tibial side, of the fibula.

The accidents received since our last report, have been a case of injury to the knee; a case of burn, not very severe; three cases of fracture of the femur; a case of fracture of the fibula, and a case of compound fracture of the tibia and fibula, in which the tibia was broken obliquely about fom inches above the ancle joint; the patient, although there is some considerable heat and swelling in the limb, is doing very favourably. There has also been received a case of compound fracture of the leg, the bone did not protrude, neither was the wound large, a small artery appears to have been wounded, since there was some little hæmorrhage, which, however, was stopped by slight pressure, and the case is doing extremely well; and one case of scald in an infant. It seems that, by some means, she swallowed some boiling water; when brought to the hospital, neither the mouth nor fauces were blistered, although highly inflamed and red; its breathing was also difficult and rattling. It was bled from the jugular vein to ʒiii. or ʒiv. which gave great relief, a blister was applied externally, and a colocynth injection administered, which acted very briskly, and on the following day the child was quite relieved, and is since doing extremely well.

ST. THOMAS'S HOSPITAL.

Amputation.

Mr. GREEN operated, on Friday, upon R. S. in Henry's ward. This man, it appears, has been troubled, for nearly 16 years, with a severe ulcer on the back of the right leg; it has been once or twice nearly healed, but has then again spread, till at last, after trying almost every known means for remedying this complaint, he was determined to have it removed; he was the more led to this from the great pain it caused him, breaking his rest, and the discharge being so highly offensive. Upon examining it there appeared an ulcer situated on the back part of the leg, upon the upper part of the gastrocnemius externus, extending upwards to within an inch and a half of the ham, and passing down the leg for the distance of between four or five inches, of an irritable disposition, the granulation flabby and unhealthy. At the upper part of the ulcer there was situated an old cicatrix, where it had once healed, extending up into the ham. The operation was performed below the knee, to endeavour, if possible, to secure a firm point of support, this poor fellow having lost his other leg at sea some years since, and which was removed above the knee.

Mr. GREEN commenced by passing the catlin in nearly opposite, but rather behind the head of the fibula, and continuing its course through the limb, its points coming out immediately behind the tibia; a flap was then, by carrying it downwards and outwards, formed of the muscles, of about two inches and a half in depth, of a semicircular shape; with a scalpel, an incision, of a similar shape and size to the posterior flap, was now made on the fore part of the leg, commencing at the inner angle of the wound, and

terminating at the point where the catlin was first introduced. The integuments forming the anterior flap were now dissected upwards, as high as the tubercle of the tibia. The periosteum covering the tibia was now divided, as also the ligaments connecting the head of the fibula and tibia, were divided. The tibia was sawn through, and the limb, with the whole of the fibula, removed. The only arteries secured were the posterior tibial and fibular. When, however, it was attempted to bring the wound together, it was found that the sharp edge of the tibia pressed very much upon the integuments, so much so as to make it most probable that, were the limb thus dressed, ulceration would ensue; to remedy this, Mr. GREEN sawed off the anterior ridge of the tibia, thus forming a line passing across the tibia, about one-third from its fore part. Still, however, the two extreme points of this line were very prominent, they were therefore gently rounded off by means of the bone knippers.

The wound was now brought together, but it was found that the old cicatrix, which occupied a great part of the posterior flap, was of a very stiff unyielding nature, so as to render it very difficult to adapt the edges of the two incisions very accurately; this was, however, very nearly effected by bringing the integuments of the thigh down as much as possible, and securing them with adhesive straps, placed in a serrated manner, very much like the eighteen-tailed bandage, each strip commencing from the posterior part of the thigh, and its two extremities overlapping each other on the anterior part.

The patient was then placed in bed; he has since been very well, although there has been very extensive adhesion of the wound.

Mr. GREEN also operated for hydrocele, in the case of R. S. in Henry's ward. After drawing off the water, the sulphate of zinc injection was used. The patient has had a smart degree of inflammation supervene, so that a very reasonable hope may be entertained of the success of the operation. It is worth observing, that this man has never had the right testicle descend through the internal ring, but has been troubled from his birth with congenital hernia.

Case of Strangulated Hernia.

On the 11th, R. S., in Isaac's ward, was operated on by Mr. GREEN for strangulated hernia. This man had been in the Hospital for some time, under Dr. SCOTT, for an affection of the heart, and had latterly felt some pain at the lower part of the belly, for which a blister was applied.

It appears that he has had a hernia for upwards of twelve years; it had, however, never given him any trouble or inconvenience, but had always admitted of being easily reduced, in which state he had always endeavoured to keep it.

On this day, however, about one o'clock, it had descended, and shortly after he attempted to replace it, but could not effect it. Being very painful, it was thought necessary to request Mr. GREEN to visit him and reduce it.

Upon examination, it was found that he had a large oblique scrotal hernia of the right side, reaching to nearly the bottom of the scrotum; that it was become somewhat painful and tense, the lower part of the abdomen had also become tender; hiccup had made its appearance, which was shortly followed with obstinate and violent vomiting. Mr. GREEN immediately had him brought into the theatre; he was bled ad deliquium, his shoulders were then placed upon a table, raised, and his thighs bent towards the body. The taxis was now applied by Mr. GREEN, who firmly grasped with his left hand that part of the tumour close to the external ring, simultaneously pressing it with his right upwards and inwards, with a sort of kneading motion. This, however, notwithstanding it was tried with the greatest care and patience, proved ineffectual at the same time that all the symptoms became more urgent. The tumour was much more tense and painful, vomiting more severe, and the pain and uneasiness at the lower part of the abdomen more distressing; such being the case, it was judged expedient to proceed to the operation without further loss of time.

Operation.

The operation was performed by Mr. GREEN, about four o'clock, who commenced by making an incision just opposite the external ring, passing downwards to nearly the lower part of the tumour, in this part of the operation merely cutting through the common integuments and subjacent cellular membrane, exposing the superficial fascia, and, running upon it, was the external pudic artery, which was divided, and then secured with a ligature; a very small opening was made through this fascia at the lowest part of the incision, into which a director was introduced, and the fascia divided by means of a probe-pointed bistoury, thus exposing the cremaster muscle, which being divided in a similar manner, directly exposed the hernial sac; this being also very carefully divided, brought into view the protruded intestine, which appeared highly vascular and in a state of inflammation; the fore-finger of the left hand was now passed into the wound and along the inguinal canal, to ascertain where the point of stricture lay. The finger readily passed through the external ring and the pubic portion of the inguinal canal, till it reached the point where the inferior margin of the internal oblique and transversalis muscles cross over it; here it became very evident the stricture was situated, and seemed to be formed of a process of firm membrane, appended, as it were, to the inferior edge of the tranversalis, and crossing, like it, over the protruded intestine, which it most firmly pressed upon, and caused the strangulation. Mr. GREEN, having distinctly ascertained this point, introduced into the wound a probe-pointed bistoury, passing it flat upon the finger until it reached the point of stricture; the instrument was now placed with its cutting edge towards the stricture, and gently insinuated under the membrane, which was very carefully divided directly upwards; the finger, on which it rested, being gently raised at the same time that the right hand drew it a little outwards. The finger was now carried on to the internal ring, but it could be perceived that this was not at all implicated or assisted in the strangulation of the intestine; it was, however, thought better to divide it in a slight degree, as when the intestines were returned they could be prevented from protruding in a slight portion through the internal ring, and of course hazarding a second stricture, considering the inflamed state of the parts. The wound was now brought together and retained by means of two sutures, assisted by adhesive straps, and the patient placed in bed with his thighs elevated. The constant vomiting which occurred would not allow the stomach to retain any thing, and he was therefore directed to have a laxative enema administered every three or four hours.

During the evening he complained of great pain and tenderness in the abdomen, and a poultice was directed to be applied; the pulse had become small, hard, and frequent; he was therefore bled to ℥xij. which produced great exhaustion. No motion has yet passed; the vomiting still continues distressing, and there is almost a constant hiccup.

He passed a very restless night; and on the morning of the 12th, the pain of the abdomen was extremely severe; he was ordered to have 24 leeches applied. The sickness not quite so violent, hiccup nearly gone, he has had no motions, the injections were ordered to be continued, and he was directed to take some salts in infusion of senna frequently. In the afternoon his pain became more violent; although it had been very severe during the morning, the vomiting was very much increased; towards evening he was evidently sinking; he, however, lingered till early in the morning of the 13th, when he expired.

A *Post-Mortem Examination* discovered a most severe attack of entiritis: the intestines were quite glued together and besmeared over with a muco-purulent matter: the peritoneum was not so much inflamed.

From the extreme obstinacy of the vomiting, as well as the very costive state of the bowels; and from the symptoms not having received the least relief by the operation, it was somewhat doubted whether there might not be some further stricture, or introsusception: but there did not appear the least sign of either.

He seemed to have sunk under a most severe attack of entiritis, and it would appear that he had for some time laboured under pain and tenderness in the lower part of the belly, and was therefore a highly unfavourable subject for an attack of strangulated hernia, or for the operation necessary to give him relief from this last complaint.

The accidents received since our last report, have been a case of burn, a case of contusion of the knee, a case of dislocation into the axilla, which was very quickly reduced, and the man is doing remarkably well.

According to a curious statement in the Philosophical Magazine, the extraordinary number of cases of cancer and schirrous complaints, in that part of Kent and Sussex bordering on Tunbridge Wells, has engaged the attention of several medical men in that district, who are endeavouring to ascertain its cause. A similar remark seems to apply to many other counties, where the poor feed much upon dried hogsflesh, and can get but little vegetable food.

THE PETIT-MAITRE APOTHECARY.

When P—nn—gt—n for female ills indites,
Studying alone not what, but how he writes,—
The Ladies, as his graceful form they scan,
Cry, with ill-omen'd rapture, "killing man."

Blackwood's Mag.

JOE BURNS.

Being pressed for space in our present Number, we cannot insert a continuation of the article on the conduct and practice of this *illustrious* Surgeon till next week; when Mr. BELL's discrepances and mistakes shall also be critically examined.

TO CORRESPONDENTS.

We are compelled to entreat the indulgence of our friends till another week.

To be disposed of, the PRACTICE of a SURGEON and APOTHECARY, situated within Three Miles South of the Bridges, and averaging 400*l.* per annum. Premium, including excellent Modern Household Furniture, Drugs, Fixtures, &c. 500 Guineas. A suitable introduction will be given.

Letters (post paid) to be addressed to Mr. Kersey, 4, Bride-court, Bridge-street, Blackfriars.

SALMON, ODY, and Co. most respectfully solicit the attention of Medical Gentlemen and the Public to observe, that the TRUE PATENT SELF-ADJUSTING TRUSS has "Salmon, Ody, and Co. 292, Strand, London," marked upon the Leather case, without which they are of the spurious kind. These instruments will answer for right or left side; they also admit of increase and decrease in size and force, requiring no under strap, buckles, or any galling bandage.—Salmon, Ody, and Co. have the honour to supply the Army and Navy, the Naval and Military Hospitals, the Transport Board, the Dock Yards, and Ordnance, the Marine Infirmary, the Honorable East India Company, the City of London Truss Society, the Middlesex and St. George's Hospitals, the Westminster, Mary-la-bonne, Windsor, Wiveliscombe, Bristol, Denbigh, Northampton, Bedford, and Peterborough Infirmaries.

N.B. Medical Gentlemen may fit their patient accurately, by sending the circumference of the Body an inch below the Spine of the Ilium for Femoral and Inguinal Hernia, and in a line with the Navel for Umbilical.

TO SURGEONS, &c.

A YOUNG GENTLEMAN, who has served a regular Apprenticeship, and since attended some of the usual Lectures on the subjects of his Profession, is desirous of a Situation as ASSISTANT. The Country would be preferred; a comfortable Abode, more than Salary, the object. Most respectable references will be given.

Letters to be addressed to M. P. care of Mr. Kastel, Oilman, No. 51, Newman-street, Oxford-street.

IMPROVED POISON APPARATUS.

Those Gentlemen who have already provided themselves with the Stop-cock POISON SYRINGE, are informed that G. MAW has just completed a most material Improvement on that Instrument, by which, with its well-known certainty of effect and simplicity, is combined a greater degree of facility and dispatch than is possessed by the most complicated of the Patent Instruments.

Those Gentlemen who are already provided with the original Stop-cock Syringe can have G. Maw's Improvement added at a small additional expense; and those about to purchase are informed, that with this Improvement the Instrument is reduced to less than half its former bulk; and also that the interruption occasioned by the necessity of alternately closing and opening the two Stop Cocks, is entirely obviated, and the operation is performed without the hand being once removed from the handle of the Instrument, either in the operation for Poison, or in administering Enemas.

Instruments to be altered, and Orders to be forwarded to G. Maw, at his Manufactory for Surgical Instruments, Enema Apparatus and Syringes, Pharmaceutical Implements, Ford's celebrated Machine-spread Cloth Plasters, &c. &c. 55, Aldermanbury, London.

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